



Service User Guide

Penmore House, Hasland Road, Chesterfield. S41 0SJ
Company No. 5763691 Registered in England and Wales
Telephone Number: 01246 232404 Fax No. 01246 563613

SERVICE USER GUIDE

Bliss Support Limited (Formerly Brain Injury Support Services Ltd) provide support for individuals 18+ and including End of Life in their own home. The level of service provided to the individual is dependent on the outcome of an individual needs assessments completed by social worker/care manager or various other professionals.

Our service provision will not commence until the individual needs assessment has been completed.

Bliss Support Limited provide support to all adult groups which include:

- Adults with a Brain Injury
- Adults with Learning Disability
- End of Life
- Adults with Physical Disabilities and Sensory Impairment
- People with Complex Needs
- Dementia
- Alcohol and Drug Abuse

The range of service provided include (where assessed as a need):

- Respite and Live In Care Services
- Group Outings and Support Forums for Service Users and their Carers
- Assist with maintaining a safe and clean environment
- Assistance with eating and drinking
- Assistance with preparation of meals and drinks
- Assistance with all aspects of personal hygiene
- Assistance with continence
- Assistance with Accessing the community for Social Development
- Assistance with Moving and handling
- Assistance with Medication Administration

Service users will only be assisted with the medication administration only if it has been identified as a specific need in the care plan completed by the care manager and in partnership with the service user. Support staff will not provide assistance with administering medication where medication has not be prescribed by a GP or qualified medical professional and a up to date relevant MAR if it has not been supplied in a blister pack by a pharmacist. Bliss Support Staff will not administer any Homeopathic Remedies or any PNR Medications as part of the medication administration.

STATEMENT OF PHILOSOPHY OF THE AGENCY

The agency's philosophy is to provide a high standard of specialist support to meet the holistic needs of service users based upon the belief that they are all entitled to be treated as individuals and with respect.

All standards of work are consistent with people's human rights however sometimes the individuals' choice may sometimes be subject to legal constraints and where possible we will aim to make a mutual agreement within legal guidelines.

The service aims to assist people with various disabilities to lead a more self sufficient lifestyle and remain living at their own home.

We endeavour to provide a professional, friendly and reliable service to enable service users to

- Live with dignity and independence and to direct their own lives
- Regain optimum functioning
- Optimise the capacity for self-care and autonomy
- Optimise the capacity to communicate with other people
- Minimise the effects of the disability and impairment
- Minimise increased emotional stress
- Minimise the restriction of dependent mobility
- Minimise the need for formal and informal carers

AIMS AND OBJECTIVES

- Monitor closely the effective running of the agency and service provision, to ensure we continue to maintain a high standard of good practice in line with our policies and procedures.
- All service Users will be treated as individuals and encouraged to be involved in the implementation of their Service User plan. We respect the rights of all service users and where possible we will work together and aim to achieve all needs.
- Support will be offered to the service user, their relatives or any person actively involved when and where it is appropriate to make life easier and more enjoyable, and to adapt to the change in circumstances.
- To provide regular support staff who are individually identified as suitable to meet the needs of each individual service user and maintain a trusting and constructive professional relationship.
- Endeavour to continually improve our service through staff training and development courses both internally and externally, and to closely monitor that we achieve to meet our service user needs.
- Liaise closely with all relevant professionals regarding the ongoing support of each service user which would include the progress of the individual or possibly raise concerns that may need addressing to improve their quality of life.

RELEVANT QUALIFICATIONS AND EXPERIENCE OF REGISTERED PROVIDER / MANAGER

The registered manager has worked for 15 years in the care sector and for the last 12 years has managed specialist agencies. She has worked with a multidisciplinary team of specialists ranging from occupational therapist, speech and language therapists, psychologists, physiotherapist and specialist Social Workers, Case Managers and Brain Injury Advisors implementing their recommendations into community and residential settings, and worked on numerous neurological wards.

She has been an active member of Chesterfield Headway for 8 years and volunteered for acting as Social Secretary arranging social events for brain injury survivors, their families and representatives.

Her last employment was with an agency specialising in supporting service users with acquired brain injury. She co-ordinated over 50 packages, which involved training, support staff and giving them ongoing supervision. Also assessing individuals and compiling individual support care plans and intervention programmes to assist staff to support care plans and intervention programmes to assist staff to support Service Users to reach their maximum level of independence.

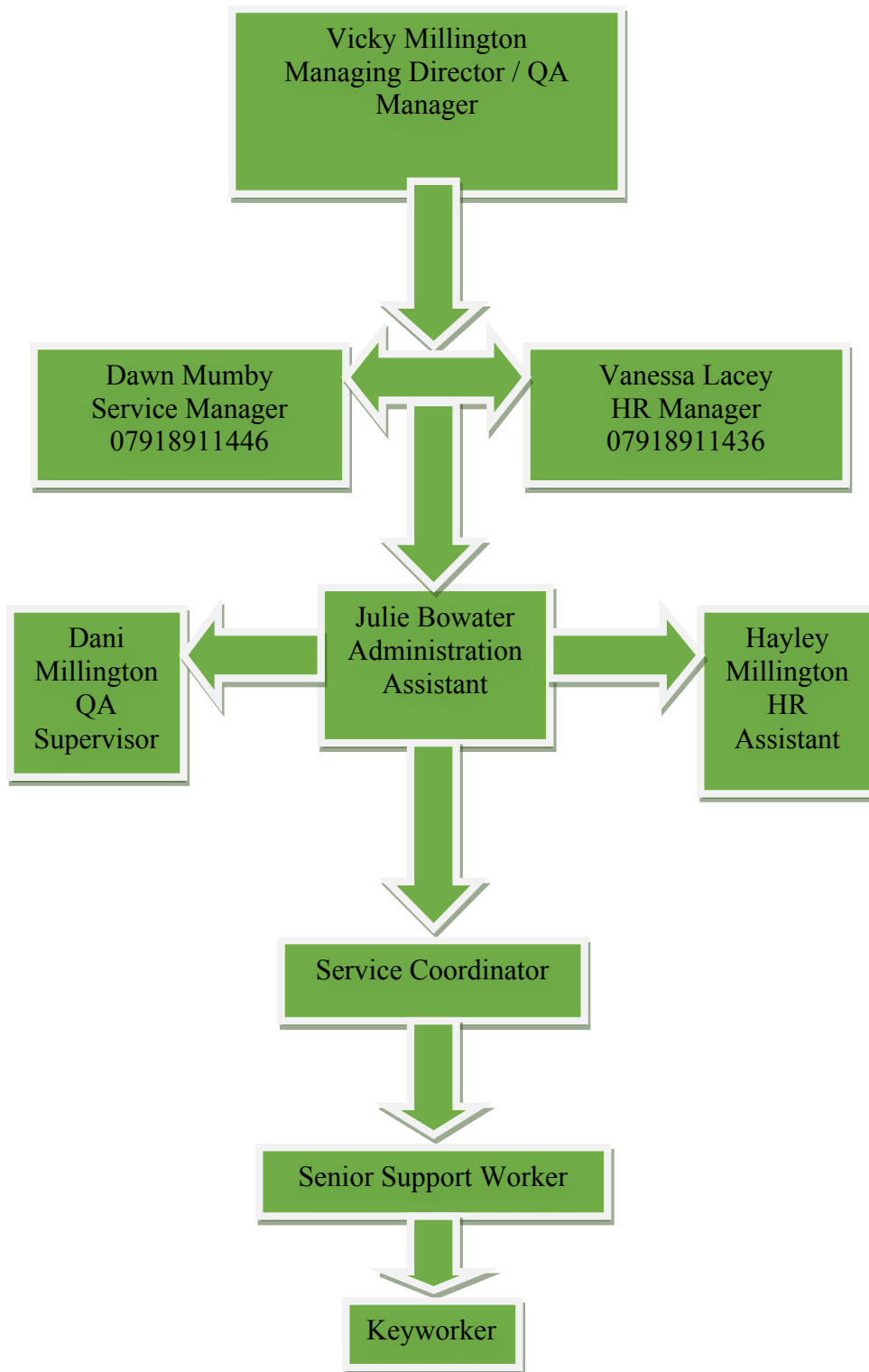
Over the last 5 years she has committed herself to developing Brain Injury Support Services Ltd, and has successfully built a management structure, and currently has 75 trained support workers. Throughout the development she maintained a hands on approach working with each individual service user.

She has obtained RSA Diploma in Business Studies, Registered Managers Award, NVQ3 in Care and also D32/33 Assessors Award, which enables her to train and assess staff to enable them to pass the relevant National Vocational Award, and continues to commit herself to this role. She is also qualified to train staff in manual handling techniques to ensure safe manual handling wherever necessary is maintained to promote the safety, comfort and dignity of the service users, Medication Administration and Safeguarding Adults which she delivers to staff and has completed a City & Guilds 7307 Teaching Certificate.

Although she has attended numerous courses to develop the knowledge in acquired brain injury, she is also in the process of completing the NVQ 4 in Health & Social Care to prove her professional capability in working with complex service users, and also intends to apply for a psychology degree.

Where it is known that the registered manager shall be absent for continuous periods of time in excess of 28 days or more notice of absence will be provided in writing to CQC, Derbyshire County Council, Sheffield City Council, Nottinghamshire County Council.

MANAGEMENT STRUCTURE



External – IT
External – Accountant
External – Employment Law

THE STAFF

It is company policy to ensure that all staff are recruited, trained and protected on the basis of ability and the requirements of the job, we are an equal opportunities employer. We follow a rigorous and robust recruitment procedure and advertise for position in local newspapers and Job Centres. All staff complete an application form, and interviews are decided on merit following our equal opportunity policy. Two references are obtained prior to offer of employment (one from previous employer and gaps in employment must be explained and evidenced). During the interview a standard set of questions are asked to assess applicants' personality, capability and approach. On offer of employment, a DBS/ISA is requested and on receipt of satisfactory DBS/ISA staff are then shadowed with an experienced member of staff, risk assessments are completed throughout the recruitment process and signed off satisfactory to work with vulnerable adults prior to lone working. Staff complete an induction programme and are required to complete a four day training programme which includes:

- Explanation of Statement of Purpose
- Training on Company Policies and Procedures
- Health and Safety /Fire Safety
- Code of Conduct (information provided)
- Medication Administration
- Sova/MCA + Dols
- Record Keeping
- Equal Opportunities
- Manual Handling
- First Aid/Epilepsy
- Food Hygiene/Tissue Viability/Infection Control

All staff are invited on refresher training days.

The aim is for all staff to achieve NVQ level 2 in care within the first year of employment and all senior staff to achieve NVQ level 3.

The company provides training for any complex/specialist need, this is provided by external bodies and have been known to travel national to get the training in place.

If any additional training is required to meet the service users needs the agency will ensure the training is undertaken by the appropriate sources such as Brain Injury/Compensatory Aids, Challenging Behaviour, Sharps/Drug Awareness, Dementia, Peg Training , this list is ongoing.

All staff are required to attend additional training courses each to improve their own professional development.

REFERRAL PROCESS (INCLUDING EMERGENCY REFERRALS)

Referrals are accepted from various sources including Social Services, health authority or private case management, direct payment, individualised budgeting and self-directed support on receipt of accreditation

- The service manager of the agency at the service user's current address or hospital will carry out an assessment of need. If the needs identified by the assessment can be met by the agency, the referral will be accepted.

Where possible during the referral process, we encourage the service user, family or representative to be present to ensure they are empowered and all aspects of privacy, dignity and respect are discussed to ensure each service user received the appropriate level of support (Please refer to our Privacy, Dignity and Respect Policy)

Emergency referral: an emergency referral can be accepted provided the person referring the service user is able to provide sufficient information for the service manager to identify the needs and risks to enable effective support until a full assessment of need must be carried out as soon as it is practicable not exceeding 10 days.

- On acceptance of referral, the service user, family or representative should receive a Service User Guide containing a breakdown of the statement of Purpose, a copy of the company Policies and Procedures, health and safety documents, liability insurance and in private cases a contract will be provided.

Staffing Arrangements

- Each service user receives 1:1 support; the level of support required varies and is determined at initial assessment.

Other considerations

- The service manager must be able to demonstrate the capacity of the agency to meet the needs (including specialist needs) of individuals accepted by the agency.

SERVICE USER PLAN

A Service User Plan will set out in detail the action that will be taken by support workers in order to meet assessed needs and enable the service user to maximise their potential and maintain their independence. Support Workers will be given full induction and training on each individual service user plan and also introduced to the service user prior to starting 1:1 support.

The service user plan is generated from information given from relevant professionals to meet contractual requirement and will contain a copy of the service user guide and the following information:-

- Service User Profile
- Contact Numbers
- Full Assessment
- Risk assessment
- Manual Handling Risk assessment (where necessary)
- Likes and dislikes
- Outcomes and goals to achieve
- Medication Authorisation (where necessary)
- Intervention and Support Programmes
- Health & Safety Assessment Form
- Whistle Blow Procedure
- Complaints Procedure
- Declarations

It is imperative to prioritise the areas of needs and the service user plan is an important legal document to be followed. The service manager will review this document on a monthly basis. Relevant professionals will be notified if there are any changes in the service user's condition which may affect their health and safety and significant amendments will be made to the service user plan if required.

If the service user is referred to a multi-disciplinary team of specialist occupational therapist, physiotherapist, speech and language therapist and psychologist we will follow their recommendations and will implement intervention programmes into the service user plan.

The service manager will attend any reviews requested by the purchaser or other professionals.

All aspects of privacy, dignity and respect are covered in the service user care plan.

A MANAGER IS AVAILABLE 24 HOURS A DAY FOR ADVICE AND GUIDANCE FOR STAFF, SERVICE USERS, RELATIVES OR REPRESENTATIVES AND WILL LIASE WITH RELEVANT PROFESSIONALS ACCORDINGLY.

PRIVACY, DIGNITY & RESPECT POLICY

Bliss Support policy is to involve people in their own care. Once a referral has been received the Service Manager will go out to see the service user to devise the care plan involving the service user in all aspects of the care thus allowing them to make their own choices in the way they want to be looked after.

Choice and Control

When devising a service user care plan it is our aim:-

- To take time to understand the person i.e. their previous lives and past achievements.
- To treat people as equals ensuring that they remain in control of what happens to them.
- To make sure that people have access to easy to understand information about services when they want or need it.
- To involve the service user fully in any decision that affects their care, including making personal decisions such as what they want to eat, wear and what time to get up and go to bed.
- Not to assume that the service user is not able to make decisions
- To ensure that staff have the necessary skills to include people with cognitive difficulties in decision-making, i.e. making sure they have full documentation of the history of the person, their preferences and habits which will then enable the staff to support their choices consistent with the character of the service user.
- To encourage and support service users to participate in the wider community and raise awareness of services such as local advocacy services.
- To involve service users in staff training if they choose to

Communication

It is Bliss Policy that all staff will have acceptable levels of English, both spoken and written.

When communicating with a service user:

- Ask how they prefer to be addressed and respect their wishes
- Always make sure the service user has information about the service we provide i.e. Service User Guide in a suitable format that they understand.
- Always ask what people want, never assume you know what people want because of their culture, ability or any other factor
- Staff will be properly trained to communicate with people who have cognitive or communication difficulties

We aim to get the views of people using our service by regularly attending reviews and sending out service user questionnaires, where we will always aim to act on service user ideas and suggestions for a better service.

Eating and Nutritional Care

Professional assessments recording dietary needs and any recommendations for assistance they require at meal times are taken into consideration when devising a service user care plan.

The following should be followed:

- Staff should always offer choice of food at mealtimes and assistance should be offered discreetly to people who have difficulty eating.
- People should always be given time to eat, and should not be rushed.
- If providing support whilst socialising around mealtimes, privacy should always be offered to people who have difficulty eating if they so wish.
- Always make sure food is accessible and available between mealtimes.

Hydration

- Encourage service users to drink regularly throughout the day by ensuring there is always access to clean drinking water or a drink of the service users choice left within reach between support times.
- Staff should be aware of urine colour as an indication of hydration level. Odourless pale urine indicates good hydration, dark strong smelling urine could be an indicator of poor hydration although there could be other causes which should be investigated by a GP.

Pain Management

As a company we will raise staff awareness that people may not report pain which can have a significant impact on dignity and well-being and that it needs to be identified and treated by a GP or an assessment team.

Staff need to be aware of the following:

- Pain can exacerbate the behavioural and psychological symptoms of dementia and this in turn could result in challenging behaviour.
- Continuity of care is important in pain recognition because regular staff would know the service user well enough to identify pain related behaviour.

- Pain can cause people to avoid activities and can increase social isolation as a result.
- Pain can be wrongly viewed as an unavoidable aspect of old age.

Personal Hygiene

Staff should always support service users to maintain their personal hygiene and appearance and their living environment to the standards that they want by giving them choice and respecting their wishes.

- Giving them choice of where they want to be washed and dressed
- Choice of clothing
- Choice of hairstyle
- Staff should not make assumptions about appropriate standards of hygiene for individuals they should always give the service user choice.
- Cultural choices should also be taken into consideration.

Practical Assistance

Staff should help people to maintain their living environment to the standards that they want.

Assist service users to tap into local services which provide help for people in the community i.e. gardening, maintenance, befriending services etc. which can reduce the risk of abuse through people taking advantage of their vulnerability. This can reduce the risk of people becoming socially isolated by assisting them to access the local community.

Social Inclusion

Staff should promote and support service users to:

- Resolve transport issues so that they do not prevent people from participating in the wider community
- Build links with community projects i.e. community centres offering services, day centres etc
- Give people ordinary opportunities to participate in the wider community through person-centred planning and giving them choice of what they want to do.

In summary service users should be treated with dignity and respect and always given their own choices in the way their care is delivered and how they want to live their lives.

THE CONDUCT AND QUALITY ASSURANCE PROCESS OF THE AGENCY
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The company places a strong on quality, as we strive to offer a quality of service users. We believe, no matter how good our present service is, there is always room for improvement.

The company believes that having the highest possible standards of care are the absolute rights of service users. The continuing aim of the company is to provide a professional and efficient service to meet the needs of service users.

All service users should expect the highest possible care from all staff. The company commits themselves to a quality assurance policy to monitor the standard of service provision. Amendments will be made accordingly if the company feels they can improve the standard of service.

Quality Assurance monitoring involves:

- **Service User Forum**
- **Regular reviews of each service user plan**
- **Weekly management meetings**
- **Quarterly staff meetings**
- **Service User review meetings**
- **Annual Standard questionnaire sent to service user and Employees**
- **Updates on policies and procedures**
- **Updates on health and safety procedures**
- **Records of complaints / compliments**
- **Records of disciplinary / grievance**
- **Close monitoring on staffing levels**
- **Training**
- **Staff appraisal/Supervision**
- **Equal opportunities**
- **Privacy, Dignity and Respect declarations**

The outcome from the quality assurance process is available for inspection by the relevant authorities. All quality assurance forms are monitored and evaluated and improvements are made in any areas of weakness, feedback to staff, service users, families and representatives is provided.

Support workers are provided with daily supervision where necessary.

COMPLAINTS/COMPLIMENTS PROCEDURE

In certain situations a member of staff, service user or relative may have a complaint, every complaint will be fully investigated as a matter of urgency. The Company will make every effort to reach an acceptable conclusion to any complaints and grievances quickly by following this policy.

Each service user will be provided with a copy of the complaints/compliments procedure and a staff member will explain the procedure if they are unable to read.

If a service user has a complaint, the following procedure must be followed:

- In the first instance, the service user, family or representative should report the complaint to a member of staff on duty or contact the service manager by telephone.
- The service manager will attempt to resolve the situation either independently or by gaining advice from other professionals.

If the conclusion to this is unacceptable, then steps will be taken for them to meet with the service manager. Service users, families or representatives who are still unhappy will be advised to contact relevant professionals involved with the service user.

All complaints are acknowledged in an appropriate form and the investigation commenced within the period specified in the service users' information. Service Users will be informed within 28 days of the outcome or such shorter period as may be reasonable in the circumstances.

Service users are kept informed at every stage of the investigation process and are given information about the appeals procedure and information about referring a complaint to the regional office of the CQC.

A record is kept of all complaints and compliments including full details of the investigation and the action, which has been taken in response. A copy of this is then kept on the personal service user file at the office and on the appropriate support workers personnel file and the complaints / compliments file at the office.

There is also a system in place to analyse and identify any pattern of complaints or compliments and will be monitored closely through the quality assurance procedure.

The service manager will be responsible to supply to the CQC at their request a statement containing a summary of all complaints made during the twelve months ending on the date of the request and the action taken in response.

Service users are encouraged to express any concerns or make a complaint, alternatively we would also encourage service users to express any compliment with regards to the agency, any staff involved with their care or about the service provision they receive.

All official complaints should be referred to the

East Midlands Region
Care Quality Commission
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Tel. No. 03000 616161

Or relevant contracts departments can be contacted:-

Derbyshire County Council
Contract Department
Contact – Steve Boswell

Tel. No 01629 772213

Sheffield City Council
Contracts Department
Contact –Andrew Scurrah
Tel. No. 0114 2736815

Appropriate bodies will be made available in the event an advocate is required to meet the needs of interpretation, communication or any other special requirement,

REGISTRATION

The agency is registered in accordance with the terms and conditions of the Care Standards Act and with the Care Quality Commission, and also succeeded in accreditation through a rigorous tender process with Derbyshire County Council, Sheffield City Council and Nottinghamshire County Council.

The agency is inspected annually (either announced or unannounced inspections). The registration certificate is displayed at the office and is available for inspection by service users, families or representatives or relevant professionals.

Inspection reports are available upon request.

The geographical area in which the agency operates

Bliss Support Limited operates within the geographical areas of Derbyshire, Nottinghamshire, South Yorkshire

CONTRACTURAL

Bliss support ltd are contracted with Sheffield City Council, Derbyshire County Council, Nottinghamshire County Council, Derbyshire Primary Care Trust, Sheffield Primary Care Trust, Nottinghamshire Primary Care Trust.

Where contracts have been agreed with the above authorities' payment will be made to Bliss Support Limited.

We also agree contracts on Independent Living Fund, Direct Payment and Self Directed Support and individualised budgeting of which a self funding contract will be agreed between Bliss Support Ltd and Service user family or representative, of which Bliss support ltd will invoice on a four weekly basis and require payment within a 30 Day period.

Other

There are few occasions where service would cease to be provided by the agency, this would be where a review of service provision has been undertaken by a care manager and has been identified that the service can either no longer meet the needs of the individual or the needs no longer exist.

Service will only be cancelled by the agency in exceptional circumstance such as adverse weather conditions although every effort will be made to ensure services are provided to the most vulnerable.

Service users who wish to cancel the services must contact the line manager not cancel support workers direct. The service user will need to provide dates where the service is to be cancelled and where known a recommencement date.

Where in exceptional circumstances we are unable to provide a planned service we will contact the service user by telephone giving as much notice as possible and the reason for cancellation.

Bliss Support Ltd roster contracted hours as requested to meet the individuals' needs although due to reasons beyond our control there may at times need to be an allowance of 15 minutes either side of the contracted hours but where possible we attempt to be punctual.

TERMS AND CONDITIONS

1. An adequate team will be identified to meet the needs of each individual service user and will be inducted accordingly. In the event of annual leave or sickness, the agency will endeavour to maintain continuity of staff to enable consistency.
2. The agency is responsible to provide relevant PPE such as gloves, aprons, masks (where applicable) to enable staff to complete personal care duties in line with health & safety regulations.
3. The agency does allow support staff to have responsibility of keys to individual service user homes, a key safe must be provided.
4. Support staff are obliged to immediately report any evidence of alcohol abuse or the use of illegal substances and appropriate action will be taken accordingly which may lead to the removal of support staff.
5. Mileage will be charged at 40p per mile in the event of a service user needing to be transported to and from activities or appointments during support hours, and requires the support worker to use their own vehicle. Where possible public transport should be used.
6. All Support Staff who use their vehicles for work have business insurance and copies of their insurance documents are held at the office.
7. If the service requires support staff to engage in activities i.e. swimming, snooker etc. the service user is required to pay for the support worker, although the cost is kept minimal.
8. All staff must not use service user telephones without the permission of the service user. This should only be requested if the telephone call is to do with the service user.
9. Support staff must not use their personal mobiles whilst on 1:1 support unless it is an emergency.
10. Support staff must endeavour at every opportunity to provide their own food during support hours. They must only consume service user food items if invited to do so by the service user or family, and this should be kept to a minimum.
11. No alteration or variation of the conditions in this agreement shall apply unless previously agreed by the responsible person (i.e. social worker)

who has approached the agency to provide support. The responsible person does have the right to alter the condition at any time and is the only person authorised to do so.

12. All support staff complete weekly timesheets, which are countersigned by the service user and assistant service manager and checked against the agreed visits. Visits to service users are recorded and retained at the office.

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**If you think our service could benefit someone you know or
you require more information**

Please contact

**Dawn Mumby
Service Manager
07918 911446**

Tel No. 01246 232404

Charges available at your request

All company documents are available in any format